

New Jersey Public Employment Relations Commission
NON-POLICE AND FIRE
COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM

Line #

SECTION I: Parties and Term of Contracts

1	Public Employer:	Demarest Board of Education	County:	Bergen
2	Employee Organization:	Demarest Custodial Association	Number of Employees in Unit:	10
3	Base Year Contract Term:	07/01/2017	New Contract Term:	3 years

SECTION II: Type of Contract Settlement (please check only one)

4 Contract settled without neutral assistance
 5 Contract settled with assistance of mediator
 6 Contract settled with assistance of fact-finder
 7 Contract settled with assistance of super-conciliator
 8 If contract was settled in fact-finding, did the fact-finder issue a report with recommendations?
 Yes No

SECTION III: Salary Base

The salary base is the cost of salaries in the final year of the expired or expiring agreement. This is the base cost from which the parties negotiate the salary increases.

9	Salary Costs in Base Year	\$ 366,945
10	Longevity Costs in Base Year	\$ 10,000
11	Total Salary Base	\$ 376,945

SECTION IV: Salary Increases for Each Year of New Agreement*

	Year 1	Year 2	Year 3	Year 4	Year 5
12 Effective Date (month/day/year)	07/01/2017	07/01/2018	07/01/2019	N/A	N/A
13 Cost of Salary Increments (\$)	4,073	8,407	6,872	0	0
14 Salary Increase Above Increments (\$)	8,770	4,886	6,886	0	0
15 Longevity Increase (\$)	0	0	0	0	0
16 Total \$ Increase (sum of lines 13-15)	12,843	13,293	13,758	0	0
17 New Salary Base (\$)	389,788	403,081	416,839	0	0
18 Percentage increase over prior year	3.41 %	3.41 %	3.41 %		%

*If contract duration is longer than five years, please add an additional page.

SECTION V: Increases in Other Contractual Economic Items or Newly Added Economic Items*

**If contract duration is longer than five years, please add on additional page.*

SECTION VI: Medical Costs

		Base Year	Year 1
21	Health Plan Cost	\$ 201,651	\$ 227,893
22	Prescription Plan Cost	\$ 0	\$ 0
23	Dental Plan Cost	\$ 9,490	\$ 10,325
24	Vision Plan Cost	\$ 0	\$ 0
25	Total Cost of Insurance	\$ 211,141	\$ 238,218
26	Employee Insurance Contributions	\$ 14,933	\$ 16,876
27	Employee Contributions as % of Total Insurance Cost	7.07	7.08

Section VI: Medical Costs (continued)

28 Identify any insurance changes that were included in this CNA.

A non-pensionable stipend will be given to DEA members contributing to the health insurance under Ch 78. This stipend is scaled based on the employees years of service in the district as follows:

Years 0-5 \$65; Years 6-14 \$165; Years 15 and greater \$415.

SECTION VII: Certification and Signature

29 The undersigned certifies that the foregoing figures are true:

Print Name:

Thomas J. Peter

Position/Title:

SAA/BS

Signature:



Date:

1/17/18

Send this completed and signed form along with an electronic copy of the contract and the signed certification form to: contracts@perc.state.nj.us

NJ Public Employment Relations Commission

Conciliation and Arbitration

PO Box 429

Trenton, NJ 08625

Phone: 609-292-9898

Revised 8/2016